

UNITED STATES PATENT & TRADEMARK OFFICE
Washington, D.C. 20231

REQUEST FOR PATENT FEE REFUND				
1 Date of Request: <u>8/14/01</u>		2 Serial/Patent # _____		
3 Please refund the following fee(s):		4 PAPER NUMBER	5 DATE FILED	6 AMOUNT
<input type="checkbox"/>	Filing			\$
<input type="checkbox"/>	Amendment			\$
<input checked="" type="checkbox"/>	Extension of Time	<u>9</u>	<u>7/23/01</u>	<u>\$695.00</u>
<input type="checkbox"/>	Notice of Appeal/Appeal			\$
<input type="checkbox"/>	Petition			\$
<input type="checkbox"/>	Issue			\$
<input type="checkbox"/>	Cert of Correction/Terminal Disc.			\$
<input type="checkbox"/>	Maintenance			\$
<input type="checkbox"/>	Assignment			\$
<input type="checkbox"/>	Other			\$
		7 TOTAL AMOUNT OF REFUND		<u>\$695.00</u>
		8 TO BE REFUNDED BY:		
10 REASON:		Treasury Check		
<input type="checkbox"/>	Overpayment			
<input type="checkbox"/>	Duplicate Payment	Credit Deposit A/C #:		
<input checked="" type="checkbox"/>	No Fee Due (Explanation):	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> <u>16</u> -- <u>0478</u> </div>		
<u>Time is MAXED OUT</u>				
11 REFUND REQUESTED BY:				
TYPED/PRINTED NAME: <u>Charles Grant</u>		TITLE: <u>attorney</u>		
SIGNATURE: <u>Charles Grant</u>		PHONE: <u>306-0281</u>		
OFFICE: <u>Pittsburgh</u>				
***** THIS SPACE RESERVED FOR FINANCE USE ONLY: *****				
APPROVED: <u>Liana Chase</u>		DATE: <u>8-17-01</u>		

Instructions for completion of this form appear on the back. After completion, attach white and yellow copies to the official file and mail or hand-carry to:

Office of Finance
Refund Branch
Crystal Park One, Room 802B